

CLAIMS ONLY							Application Number 10/789,529	Filing Date
							Applicant(s)	
							* May be used for additional claims or amendments	
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/		/				51	
2	/		/				52	
3	/		/				53	
4	/		/				54	
5	/		/				55	
6	/		/				56	
7	/		/				57	
8	/		/				58	
9	/		/				59	
10	/		/				60	
11	/		/				61	
12	/		/				62	
13	/		/				63	
14	/		/				64	
15	/		/				65	
16	/		/				66	
17	/		/				67	
18	/		/				68	
19	/		/				69	
20	/		/				70	
21	/		/				71	
22	/		/				72	
23	/		/				73	
24	/		/				74	
25	/		/				75	
26	/		/				76	
27							77	
28							78	
29							79	
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32							82	
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34							84	
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37							87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
Total Indep	12		1				Total Indep	
Total Depend	26		12				Total Depend	
Total Claims	26		13				Total Claims	